

# CANDIDATE'S ELECTION DAY EXPENDITURES

1/8

(to be filed by a candidate or his principal campaign committee)

This report is required to be filed by all candidates who are required to file campaign finance disclosure reports even if no election day expenditures were made. The report is due not later than 10 days after the primary election, and, again, not later than 10 days after the general election if the candidate participates in the general election. This form is used to report payments by the candidate or his political committee (1) for advertising that is broadcast or published on election day, (2) for the services of election day workers, and (3) to organizations for election day activities in support of the candidate. NOTE: This report is required in addition to all other required reports. Therefore, the expenditures reported on this report must be reported in subsequent "Candidate's Reports" for this election.

Hand deliver or mail to: CAMPAIGN FINANCE, 8401 United Plaza Blvd., Suite 200, Baton Rouge, LA 70809-70178.

1. Full Name and Address of Candidate Tony Licciardi Post Office Box 2586  Hammond LA 70404	2. Office Sought (Include title of office as well as parish, city, town and/or election district) State Rep - District 73 Tangipahoa Parish 73	10/30 <b>OFFICE USE ONLY</b> 0709257
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3. Name and address of principal campaign committee (Applicable only if candidate has a principal campaign committee)	Please see attached sheets.
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4. Date of Primary Election 10/20/2007
Date of General Election

5. Total Expenditures by Category	
a. Television Advertising (Schedule A)	0.00
b. Radio Advertising (Schedule A)	0.00
c. Newspaper Advertising (Schedule A)	0.00
d. Services of Election Day Workers (Schedule B)	6200.00
e. Payments to Organizations for Election Day Activities/Services (Schedule C)	0.00

For any category in which no election day expenditures were made, write -0- next to the category in item 5. Any schedules not required to be completed may be omitted from this report.

6 a. Name of Person Preparing Report	6 b. Daytime Telephone Please see attached sheets.
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7. WE HEREBY CERTIFY that the information contained in this report and the attached schedules is true and correct to the best of our knowledge, information and belief, and that no election day expenditures have been made that have not been reported herein, and reported by the Louisiana Campaign Finance Disclosure Act.

Dated 10/30/2007

Tony Licciardi  
Signature of Candidate/Chairperson (To be signed by  
Chairperson only if report by principal campaign committee)

886-361-6465  
Daytime Telephone Number

Jeffery T. Oleson  
Signature of Treasurer

886-687-6333  
Daytime Telephone Number

<p><b>Name and Address of Person Preparing Report</b></p> <p>Jeffery T. Oglesbee          Post Office Box 96            Albany LA 70711</p> <p><b>Chairperson:</b></p>	<p><b>Candidate Information</b></p> <p>Office Sought (include title of office as well as parish, city, town and/or election district)</p> <p><b>Name of Political Party:</b></p> <p><input type="checkbox"/> SUPPORTED <input type="checkbox"/> OPPOSED by the Committee</p>
<p><b>Daytime Telephone (Preparer):</b> 985-587-5333</p>	<p><b>Rel of AR. Org. to Comm:</b></p>

**SCHEDULE B: ELECTION DAY WORKERS**

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The following information must be provided for each individual to whom an expenditure was made for services performed on election day. Also, the information must be provided for each individual performing services on election day to whom a monetary expenditure was made by an organization to which a payment was made by the candidate completing this report. Such an organization is required by law to furnish this information to the candidate completing this report.

1. Name and Address of Recipient	2. Social Security Number	3. Amount Paid	4. Organization Making Payment (If applicable)
Charles Alford		200.00	
Yvonne Beard		100.00	
Kenneth Bell		100.00	
Patricia Bell		100.00	
Yvonne Bell		100.00	
Johnny Blount		100.00	
Willie Blount		100.00	
Jacqueline Brumfield		100.00	

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4/9

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1. Name and Address of Recipient	2. Social Security Number	3. Amount Paid	4. Organization Making Payment (If applicable)
Otis Brumfield		200.00	
John Burns		100.00	
Tyra Cyprian		100.00	
Jason Davis		100.00	
DJ Derouen		100.00	
Sandra Dinomes		100.00	
Terence Dinomes		100.00	
Randall Edwards		100.00	

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5/8

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1. Name and Address of Recipient	2. Social Security Number	3. Amount Paid	4. Organization Making Payment (If applicable)
Ray Edwards		100.00	
Shree Glass		100.00	
Olischia Gray		200.00	
Ashia Green		100.00	
Larry Green Sr.		200.00	
Larry Green Jr.		100.00	
Bernadine Harris		100.00	
Gladys Hayes		100.00	
Senora Henderson		100.00	

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6 / 9

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1. Name and Address of Recipient	2. Social Security Number	3. Amount Paid	4. Organization Making Payment (If applicable)
Sandra Henderson		100.00	
Vera Henderson		100.00	
Dane Higgenbotham		100.00	
Jimmy Holmes		100.00	
Carolyn Jackson		100.00	
Cathy Johnson		100.00	
Tatiana Johnson		100.00	
Melvin Knox		100.00	

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7/9

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1. Name and Address of Recipient	2. Social Security Number	3. Amount Paid	4. Organization Making Payment (if applicable)
Marie L. Brunfield		100.00	
Harrison Lewis		100.00	
Melvin Liles		100.00	
Latoya Lloyd		100.00	
Hogan Miller		100.00	
JR Penny		100.00	
Willbert Pines Sr		100.00	
Cornelius Pines		100.00	

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1. Name and Address of Recipient	2. Social Security Number	3. Amount Paid	4. Organization Making Payment (if applicable)
Nathaniel Pines		100.00	
Eddie Robinson III		100.00	
Betty Robinson		100.00	
Eddie Robinson		100.00	
Norman Sanders		300.00	
Felicia Scott		100.00	
Tarbleha Scott		100.00	
Terry Scott		100.00	



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1. Name and Address of Recipient	2. Social Security Number	3. Amount Paid	4. Organization Making Payment (If applicable)
Ernet Thom		100.00	
Michael Thom		100.00	
Henry Washington		100.00	
Ivy Washington		100.00	
Carolyn Wheeler		200.00	
E Wheeler		100.00	
Share Wheeler		100.00	